



# REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05)  
Indiana Election Commission (IC 3-9-5-14)

(CFA-4)

## Summary Sheet

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

**INSTRUCTIONS:** Please type or print legibly **IN BLACK INK** all information on this form. For assistance in completing this form, see instructions on the reverse side.

IS THIS AN AMENDMENT? ☐ Yes ☐ No

### COMMITTEE INFORMATION

1. Full Name of Committee (as on Statement of Organization) ☐ Check if this is a new name

Committee to Elect Kevin "Woody" Rider

2. Acronym or Abbreviated Name (if any)

3. Committee Telephone Number  
(317) 847-6970

4. Mailing Address (address where all campaign finance correspondence is received) ☐ Check if this is a new address

1473 Second Way

5. City, State, ZIP Code

Carmel IN 46033

6. Party Affiliation (if applicable)

Republican

### CANDIDATE INFORMATION (For Candidate's Committees Only)

7. Full Name of Candidate (include any nickname)

Kevin D. "Woody" Rider

8. Party Affiliation or If Independent Candidate

Republican

9. Office Sought (Include district number, if any. Not required for exploratory committee.)

City Council At-Large

10. County of Residence

Hamilton

### TYPE OF REPORT

11. Check one:

☒ Pre-Primary ☐ Pre-Election ☒ Annual ☐ Nomination ☐ Other \_\_\_\_\_  
☐ Final/Disbands Committee (lines 18, 19, and 20 must be "Y") ☐ Outgoing Treasurer (within 10 days amend Statement of Organization)

Check one:

☐ Pre-Convention  
☐ Post-Convention

12. Reporting Period:

From: 1-1-08

Through: 12-31-08

COLUMN A  
This Period

COLUMN B  
Year to Date

13. Cash on hand and investments at the beginning of this reporting period.

4533.30

14. Cash on hand and investments January 1, current year.

4533.30

### CONTRIBUTIONS AND RECEIPTS

(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)

15a. Itemized (use Schedule A)

0

0

15b. Unitemized

0

0

15c. Add lines 15a and 15b in both columns

SUBTOTAL

0

0

16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B

TOTAL

4533.30

4533.30

### EXPENDITURES

(Note: These amounts include in-kind expenditures and loan repayments.)

17a. Itemized (use Schedule B) (Public Question: use Schedule C)

2232.46

2232.46

17b. Unitemized

17c. Add lines 17a and 17b in both columns

SUBTOTAL

2232.46

2232.46

18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)

TOTAL

2300.84

2300.84

19. Debts OWED BY the committee (use Schedule D)

20. Debts OWED TO the committee (use Schedule E)

### CERTIFICATION

FOR OFFICE USE ONLY

Signature on File

I, THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.

Title

Date

Date

1-20-09

copied for sale or used for any commercial purpose. (IC 3-9-4-5) A person who knowingly  
(13) A person who fails to file a complete or accurate report as required by the Indiana  
4-1-14) and may be subject to civil penalties. (IC 3-9-4-16, IC 3-9-4-17, IC 3-9-4-18)

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COURTS (17)


**REPORT OF RECEIPTS AND EXPENDITURES  
OF A POLITICAL COMMITTEE**

State Form 4806 (R13/11-05)

Indiana Election Commission (IC 3-9-5-14)

**(CFA-4 SCHEDULE B)  
ITEMIZED EXPENDITURES**

**INSTRUCTIONS:** Please type or print legibly in **BLACK INK** all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaling on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities **OVER \$100** per recipient, within a calendar year **MUST** be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) **MUST** be itemized on this schedule.

FILE NUMBER

Page \_\_\_\_\_ of \_\_\_\_\_

| RECIPIENT'S NAME AND MAILING ADDRESS<br>(street, number, city, state, ZIP code)                          | RECIPIENT'S OCCUPATION<br>OFFICE SOUGHT (if applicable) | TYPE OF EXPENDITURE<br>and<br>PURPOSE (be specific)  | COLUMN A<br>AMOUNT THIS<br>PERIOD | COLUMN B<br>CUMULATIVE<br>YEAR-TO-DATE | DATE OF<br>EXPENDITURE        |
|--|---|--|-----------------------------------|--|-------------------------------|
| Code <u>0</u> <u>Shirts for You</u>  |   | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input checked="" type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose: | 350.81                            | 350.81                                 | 1/24/08<br><del>3-24-08</del> |
| Code <u>C</u> <u>Com to Elect Paul<br/>Jelic</u>   |   | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:            | 250.00                            | 250.00                                 | 3-24-08                       |
| Code <u>C</u> <u>Carmel Elementary School</u>  |   | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:            | 500.00                            | 500.00                                 | 5-15-08                       |
| Code <u>C</u> <u>Hamilton County Rep Party</u>   |   | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:            | 80.00                             | 80.00                                  | 5-21-08                       |
| Code <u>0</u> <u>Hobbsier Badge</u>  |   | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:            | 101.65                            | 101.65                                 | 7-2-08                        |
| Code <u>C</u> <u>Jerry Storr</u>   |   | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:            | 200.00                            | 200.00                                 | 8-18-08                       |
| Code <u>C</u> <u>Jerry Storr</u>   |   | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:            | 400.00                            | 600.00                                 | 8-20-08                       |
| SUBTOTAL THIS PAGE OF SCHEDULE B   |   |  | \$1832.46                         |  |                               |
| TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY<br>(Enter total on ITEM 17a of the Summary Sheet) |   |  | \$                                |  |                               |

TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY  
(Enter total on ITEM 17a of the Summary Sheet)

\$2232.46